

2011 APR -1 A 9:08

Please type or print in ink.

2011 APR -7 PM 4:50

NAME OF FILER

(LAST)

(FIRST)

CITY OF Santee

Date

Jack

Eugene

1. Office, Agency, or Court

Agency Name

City Council Member

Division, Board, Department, District, if applicable

Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: SANDAG

Position: 2nd Vice Chair/ Transportation Committee

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of Santee

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_

Office sought, if different than Part 1: \_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule B - Real Property - schedule attached

► Total number of pages including this cover page: \_\_\_\_

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this

I certify under penalty of perjury under the laws of the State of California that

Date Signed

3/31/11

(month, day, year)

Signature

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name Jack Drake

► STREET ADDRESS OR PRECISE LOCATION

1001 B ST. #213  
CITY

POINTEA LA 92118

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

    /     / 10          /     / 10  
ACQUIRED                  DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust      ☐ Easement  
  
☐ Leasehold      ☐ Other  
   Yrs. remaining                  Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

    /     / 10          /     / 10  
ACQUIRED                  DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust      ☐ Easement  
  
☐ Leasehold      ☐ Other  
   Yrs. remaining                  Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

    %      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

    %      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

*Jack Dale*

► STREET ADDRESS OR PRECISE LOCATION

9502 Hinton Dr.

CITY

Santee

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10  
ACQUIRED

\_\_\_\_/\_\_\_\_/10  
DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

8345 Rumson Dr.

CITY

Santee

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10  
ACQUIRED

\_\_\_\_/\_\_\_\_/10  
DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Debbie Castillo

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Jack Dale

## ▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

## YOUR BUSINESS POSITION

Insurance Agency

## YOUR BUSINESS POSITION

Agent

GROSS INCOME RECEIVED

☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☒ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_ (Describe) \_\_\_\_\_

GROSS INCOME RECEIVED

☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_ (Describe) \_\_\_\_\_

▶ **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

NAME OF LENDER\*

INTEREST RATE

TERM (Months/Years)

ADDRESS (Business Address Acceptable)

\_\_\_\_\_ % ☐ None

BUSINESS ACTIVITY, IF ANY, OF LENDER

SECURITY FOR LOAN

☐ None ☐ Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

☐ Real Property \_\_\_\_\_  
*Street address*  
 \_\_\_\_\_  
*City*

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

Name

*Jack Dale*

SCHEDULE D  
Income – Gifts

NAME OF SOURCE  
*Luv Gala. 57 Pkws for  
Homes - Services*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
*Fund Raiser*

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<i>8/27/10</i>	<i>\$ 150</i>	<i>Dinner / Banquet</i>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE  
*Juliana Grocks*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
*60P events*

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<i>9/24/10</i>	<i>\$ 100.00</i>	<i>Tix.</i>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE  
*Cox Communications*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
*Paid Tix.*

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<i>5/1/10</i>	<i>\$ 150.00</i>	<i>4 Baseball Tix.</i>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  Jack Dale

► NAME OF SOURCE  
AT-T

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
FIRST COUNTY Chamber event

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/26/10</u>	<u>\$150.00</u>	<u>Tix.</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
Leo Hunt Angie Hunt

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/27/10</u>	<u>\$150-</u>	<u>Tix Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
Boys N Girls club event

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Annual Fund raiser

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/1/10</u>	<u>\$250-</u>	<u>Tix Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
Allard Wink

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Lunch

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7/2/10</u>	<u>\$20-</u>	<u>Lunch</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
San Diego Tix payor

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Annual Fund raiser

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	<u>Tix Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE  
Sustainable San Diego

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Breakfast

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8/10/10</u>	<u>\$25</u>	<u>Breakfast</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: \_\_\_\_\_

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
**AMENDMENT**

**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

*A Public Document*

CITY CLERK'S OFFICE  
2011 APR 28 A 9:17  
CITY OF SANTEE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Date Jack E

**1. Office, Agency, or Court**

Agency Name

City of Santee

Division, Board, Department, District, if applicable

Your Position

Council /Agency /Commission Member

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☒ City of Santee

☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: \_\_\_\_\_

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

**5. Verification**

(d)(5)

I have made an reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge (d)(5)

I certify under penalty of perjury under the laws of the State of California

Date Signed 7/26/11  
(month, day, year)

with your filing official.)

11 MAY -1 PM 12:39

**SCHEDULE D**  
**Income - Gifts**

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

**AMENDMENT**

► NAME OF SOURCE

AT&T

ADDRESS (Business Address Acceptable)

1340 Trade Street #H, San Diego 92121

BUSINESS ACTIVITY, IF ANY, OF SOURCE

East County Chamber event

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

2 / 26 / 10 \$ 150 tickets

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

► NAME OF SOURCE

Boys & Girls Club event

ADDRESS (Business Address Acceptable)

8820 Tamberly Way, Santee 92071

BUSINESS ACTIVITY, IF ANY, OF SOURCE

annual fundraiser

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

5 / 1 / 10 \$ 250 tickets - dinner

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

► NAME OF SOURCE

San Diego Tax Payer

ADDRESS (Business Address Acceptable)

707 Broadway, Ste 905, San Diego 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

annual fundraiser

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

5 / 20 / 10 \$ 49.50 tickets - dinner

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

► NAME OF SOURCE

Lead San Diego event - Andrew Park

ADDRESS (Business Address Acceptable)

110 West A Street, Ste 960, SD 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

community leadership organization

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

5 / 27 / 10 \$ 150 tickets - dinner

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

► NAME OF SOURCE

Allied Waste

ADDRESS (Business Address Acceptable)

8364 Clairemont Mesa Blvd, San Diego 92111

BUSINESS ACTIVITY, IF ANY, OF SOURCE

lunch -trash collection/disposal

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

7 / 2 / 10 \$ 20 lunch

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_ \$ \_\_\_\_\_

**Verification**

Print Name Jack E. Dale

Office, Agency or Court City of Santee

Statement Type ☒ 2010/2011 Annual ☐ Assuming ☐ Leaving  
☐ (yr) Annual ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date 5/26/11 (d)(5)

Signature

Comments: Amending to add addresses, and value for SD Taxpayer



11 MAY -1 PM 12:39

**SCHEDULE D**  
**Income – Gifts**

**AMENDMENT**

► NAME OF SOURCE  
Sustainable San Diego

ADDRESS (Business Address Acceptable)  
110 W "C" Street, Suite 1013, San Diego 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
breakfast - energy sustainability

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8 / 10 / 10</u>	<u>\$ 20</u>	<u>breakfast</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

► NAME OF SOURCE  
Jeremy Stocks , Encinitas Council Member

ADDRESS (Business Address Acceptable)  
505 S. Vulcan Avenue, Encinitas 92024

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
GOP event

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9 / 24 / 10</u>	<u>\$ 100</u>	<u>ticket</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

► NAME OF SOURCE  
BB&K, Attorneys at Law

ADDRESS (Business Address Acceptable)  
655 West Broadway, San Diego 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9 / 10 / 10</u>	<u>\$ 120</u>	<u>Dinner.</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

► NAME OF SOURCE  
St Paul's Senior Homes & Services - Luv Gala

ADDRESS (Business Address Acceptable)  
111 Elm Street, San Diego 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8 / 27 / 10</u>	<u>\$ 150</u>	<u>dinner banquet</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

► NAME OF SOURCE  
Cox Communication

ADDRESS (Business Address Acceptable)  
1224 Broadway, El Cajon 92020

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Padre tickets

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5 / 1 / 10</u>	<u>\$ 155</u>	<u>4 baseball tickets</u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>
<u>  /  /  </u>	<u>\$</u>	<u>  </u>

**Verification**

Print Name Jack E. Dale

Office, Agency or Court City of Santee

Statement Type ☒ 2010/2011 Annual ☐ Assuming ☐ Leaving  
☐ (yr) Annual ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date 9/20/11  
(d)(5)

Signature 

Comments: amending to add addresses and BB&K gift